Dear

 **HEALTH AND SAFETY PLAN**

Thank you for completing and submitting the event permit application form. We have reviewed your application and can now advise that based on the information you have provided to QLDC we have categorised your event as being **Medium Impact.**

Under the Health and Safety at Work Act 2015 (HSWA) you as the event organiser have a duty of care to ensure that no one is harmed as a result of your event. QLDC is responsible for ensuring you have a plan in place that shows you understand and are prepared to manage the risks (likelihood of what could go wrong) and hazards (what could create risk) associated with the planning and delivery of your event.

Event health and safety planning must;

* be specific to the event i.e. not a generic plan
* take into consideration all event participants and spectators, event staff, activity provider employees/ contractors/subcontractors, and volunteers at your event (event stakeholders)
* be kept updated as and when new hazards and the control of those hazards have been identified both before, during and after your event.

To fulfil your obligations under the HSWA, all organisers of medium impact events are required to complete a hazard/risk register detailing how hazards will be managed at the event. It is your responsibility to address all potential hazards including those related to the site or those you may bring on site. Where QLDC has specific knowledge of significant hazards on a given site, we will notify you of those hazards.

Within the attached document you will find templates to assist you with developing a Health & Safety Policy, Key Contacts Register, Contractors Register, Lost Child/Vulnerable persons form as well as a Hazard Register for your event. Please utilise this Hazard Register to document the specific hazards associated with your event. You will also need to detail the control steps (eliminate or minimise) you will take to manage each hazard.

On completion please ensure that the Policy is both signed and dated before providing a copy to QLDC.

If you have any questions or concerns regarding any of the following, please feel free to contact me to discuss by email at       or by phone on (03)      .

Kind Regards

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# Event Health and Safety Policy

Event Name:

Date:

Location(s):

      recognises its duty of care under the Health and Safety at Work Act 2015 (HSWA) to protect the health, safety, so far as is reasonably practicable of all people directly associated with the event, including members of the public, whether attending the event or not.

We are committed to providing a safe environment for everyone to the best of our abilities. The details are set out in the event specific Health and Safety Plan which complies with the requirements set out in the Health and Safety at Work Act 2015 and other relevant legislation.

We confirm that the following requirements are part of the plan:

* A process is in place for the identification, assessment, and control of hazards
* Ongoing and systematic monitoring and review of control measures for hazards at intervals appropriate to the event
* Health and Safety responsibilities are clearly assigned to designated persons
* An incident record is kept on site and in accordance with WorkSafe New Zealand [see [WorkSafe website](https://www.worksafe.govt.nz/search/SearchForm/?Search=incident+record&action_results=Go) for further information and downloadable templates]
* All participants at the event possess the necessary knowledge, skills, and training that enable them to perform their job adequately
* The event location has been inspected by the designated health and safety person to ensure the venue’s safety
* An emergency plan which takes into consideration the event location, pack-in, pack-out, event activities, and any specialist procedures and instruction that may be required has been developed and communicated.

|  |  |  |  |
| --- | --- | --- | --- |
| **Signature** |  | **Title** |       |
| **Printed name** |       | **Date** |       |

# Event details

|  |
| --- |
| Event name:      |
| Event location: *(e.g. name of park/beach/public building including address)*      |
| Event date/s and time/s:  | Event start date:       | Event end date:       |
|  | Event start time:       | Event end time:       |
|  | Pack-in date:       | Pack-out date:       |
|  | Pack-in time:       | Pack-out time:       |
| Event organiser contact details: | Contact name:       |
|  | Mobile:      Phone:      Email:       | Address:       |
| QLDC Event Facilitator: | Name:       |
|  | Email:       |
|  | Phone/Mobile:       |
| Event description: *(briefly outline the nature of the event)*      |
| Participants and spectators | Yes | No | **Expected number of persons:** |
| Participants |[ ] [ ]        |
| Employees  |[ ] [ ]        |
| Contractors |[ ] [ ]        |
| Volunteers |[ ] [ ]        |
| Vendors  |[ ] [ ]        |
| Others       |[ ] [ ]        |
| Spectators |[ ] [ ]        |
| A separate document “Guidelines for Event Safety Plans” has been provided to assist in completing your plan, the right hand column in the table below indicates the relevant section.Each of the following items, if applicable to your event, shall be addressed. |
| Event Safety | Yes | No | If “yes,” consider |
| Emergency Management |[ ] [ ]  2.1 |
| First aid |[ ] [ ]  2.2 |
| Security |[ ] [ ]  2.3 |
| Lost Child/Vulnerable Persons |[ ] [ ]  2.4 |
| Animal Welfare |[ ] [ ]  2.5 |
| Traffic management |[ ] [ ]  2.6 |
| Significant impacts/hazards |[ ] [ ]  2.7 |
| Special effects. Use of pyrotechnics/fire/light shows |[ ] [ ]  2.8 |
| Pack-in and Pack-out |[ ] [ ]  2.9 |
| Temporary structures  |[ ] [ ]  2.10 |
| Ground Penetrations  |[ ] [ ]  2.11 |
| Electrical Equipment and Liquefied Petroleum Gas (LPG) |[ ] [ ]  2.12 |
| Maritime Event |[ ] [ ]  2.13 |
| Adventure Activities |[ ] [ ]  2.14 |
| Drones, Unmanned Aerial Vehicles (UAV’s) |[ ] [ ]  2.15 |
| Flight Activities |[ ] [ ]  2.16 |
| Incident Reporting |[ ] [ ]  2.17 |
| Any ground penetrations (marquee stakes, fence posts etc.) must be discussed with manager of the asset and approved and signed off.Comments, instructions, requirements.QLDC asset manager\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_Event representative\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_ |

# Lost Child/Vulnerable Persons Report Form

|  |  |  |  |
| --- | --- | --- | --- |
| **Event:** | Name:       | Date:       | Time:       |
| **Report written by:** | Name & Job Title:       |
| Person who delivers child: | Name:       |
| Mobile:      Phone:      Email:       | Address:       |
| **Location where child was found:** |       |
| **Child details:** | Name:       |
| Gender:       | Ethnicity:       |
| Age:       | Clothing:       |
| Eye colour:       | Hair colour:       |
| Mobile number (if applicable):       |
| **Caregiver/parent details:** | Name:       |
| Mobile:      Phone:      Email:       | Address:       |
| ID: | Type:       | Relationshipto child:       |
| Number:       |
|  |  |  |  |
| *Signature(s) of caregiver* |  | *Signature(s) of responsible event staff* |

# Key responsibilities and contact details

|  |  |  |  |
| --- | --- | --- | --- |
| Responsibility | Name of contact person | Contact number | Company name  |
| Event management |       |       |       |
| Designated H&S person |       |       |       |
| First aid |       |       |       |
| Emergency control |       |       |       |
| Security |       |       |       |
| Traffic management (incl. parking)  |       |       |       |
| Waste management |       |       |       |
| Lost children/vulnerable persons |            |            |            |
| Welfare of animals |       |       |       |
| Liaison with emergency services |       |       |       |
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Note: Please provide details of key contact people during the event and after hours.

# Contractors

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| --- | --- | --- | --- | --- |
| Type of service | Deliverables | Name of contact person and company name | Contact number | Certificate confirmed by event organiser  |
|  |  |  |  | Yes | N/A |
| Amusement equipment |       |       |       |[ ] [ ]
| Electrical |       |       |       |[ ] [ ]
| Food stalls |       |       |       |[ ] [ ]
| Pyrotechnics |       |       |       |[ ] [ ]
| Scaffolding |       |       |       |[ ] [ ]
| Security |       |       |       |[ ] [ ]
| Traffic management |       |       |       |[ ] [ ]
| LP Gas |       |       |       |[ ] [ ]
| Cleaning and Waste |       |       |       |[ ] [ ]
| Drinking Water |       |       |       |[ ] [ ]
| Ablution facilities |       |       |       |[ ] [ ]
| Special Effects |       |       |       |[ ] [ ]
|  |       |       |       |[ ] [ ]
|  |       |       |       |[ ] [ ]
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|  |       |       |       |[ ] [ ]
| Use a separate sheet(s) if required |

# HAZARD Register

As the organiser of an event, you are required, under the Health and Safety at work Act 2015, to eliminate the risks to health and safety so far as is reasonably practicable, if it is not reasonably practicable to do so then you must minimise the risk so far as reasonably practicable. To do this you will need to document and demonstrate what reasonably practicable steps are being taken to fulfil your obligations.

|  |  |  |
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| **Hazard:**Any source of potential damage, harm or adverse health effects on something or someone under certain conditions.  |  | **Eliminate or Minimise the Risk**Consider first whether the risk be eliminated (e.g. can you remove the source of the harm?). If the risk can’t be eliminated, then it must be minimised using control measures. |
| **Risk:**Risk has two components – the likelihood that it will occur and the consequences (degree of harm) if it happens. | **Control:**To determine the control measures you could use:Check the internet for any guidance you could follow.Involve others in the process. Think about easy and accessible the ways to control the risk and whether they will work.Think about whether the controls you implement could create other risks.Make sure your check and review your controls to see that they are effective. |
| **Identify:**All hazards should be systematically identified in areas affected by and part of the event. |  |
| **Assess the Risk:**Once hazards have been identified, think about the seriousness of the consequences of being exposed to the hazards you have identified, and how likely this is to occur. Focus your attention initially on the risks that could cause serious injury or illness or death – even if this is not very likely. |  |

## Pack in/Pack out hazards

|  |  |  |  |
| --- | --- | --- | --- |
| **Hazard-** *E.g. moving vehicles, work at heights, power tools* | **Consequence** | Eliminate (**E**) or Minimise (**M**) | **Control** |
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| Use a separate sheet(s) if required |

## High Risk hazards

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| **Hazard** *E.g. maritime events, animals, pyrotechnics, special effects,* | **Consequence** | Eliminate (**E**) or Minimise (**M**) | **Control** |
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| Use a separate sheet(s) if required |

## Environmental hazards

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| **Hazard-***E.g. exposure to extreme weather conditions involving UV, high wind, high rain, tides etc.* | **Consequence** | Eliminate (**E**) or Minimise (**M**) | **Control** |
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| Use a separate sheet(s) if required |

## Electrical Sound and Lighting hazards

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| **Hazard-** *E.g. Faulty equipment, cables causing tripping hazards etc.* | **Consequence** | Eliminate (**E**) or Minimise (**M**) | **Control** |
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| Use a separate sheet(s) if required |

## Staging and Structures hazards

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| **Hazard-** *E.g. Stage access, ground stability, etc.* | **Consequence** | Eliminate (**E**) or Minimise (**M**) | **Control** |
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| Use a separate sheet(s) if required |

## Other hazards

|  |  |  |  |
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| **Hazard-** *Any additional hazards that have been identified but that do not fall under the above categories* | **Consequence** | Eliminate (**E**) or Minimise (**M**) | **Control** |
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